The State of Provider Directory Accuracy

Provider Directory Update Requirements National Association of Insurance Qualified Medicare Medicaid Commissioners **Health Plans** Advantage Managed Care at least monthly within 30 days at least monthly within 30 days • CALENDAR • Provider Directories Requirements by State (Commercial Market)

Provider directory updated at least on a monthly basis with potential additional provider validation requirements

Provider directory updated required between a quarterly to an annual basis



Provider directories are required to be "up-to-date" or updated in a timely manner



No additional state-level guidance or requirements specific to provider directories

Learn how LexisNexis[®] and the American Medical Association have joined forces to help the industry update and maintain provider directories. For more information call 866.396.7703.

Source: BRG Healthcare - Network Adequacy in a Nutshell: Requirements And Regulations. Retrieved November 15, 2016 from http://www.brgnetworkadequacy.com/requirements-and-regulations



Health Care



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